FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB Approval

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response . . . 16.00

SEC USE ONLY					
Prefix		Serial			
D/	ATE RECEI	VED			

	• • • • • • • • • • • • • • • • • • •
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Lone Star State Bancshares, Inc.	·
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing:   New Filing   Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Lone Star State Bancshares, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2599 74th Street, Lubbock, Texas 79423	(806) 771-7717
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Bank holding company	
Type of Business Organization	
• • • • • • • • • • • • • • • • • • • •	please specify
□ business trust □ limited partnership, to be formed	070B7540
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 3 0 7	Actual   Estimponco
• • • • • • • • • • • • • • • • • • • •	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	
Civilor Canada, Pivilor other foreign jurisdiction)	Actual EstiPROCESSED
GENERAL INSTRUCTIONS	2000
GENERAL INSTRUCTIONS	_

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230 SNANOIAL U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below, or if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02) 1 of 8

## A. BASIC IDENTIFICATION DATA

### 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and n	ianaging partner of	partner issuers.			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Gilliam, Jr., Frosty	findividual)	,			
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Hallgren, Mark	findividual)				
Business or Residence Addre 2599 74th Street, Lubbock, T	*	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner			☐ General and/or Managing Partner
Full Name (Last name first, in Lackey, Alan	findividual)				
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, it Needham, Charles E.	findividual)				
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Porter, Wade	individual)				
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Ware, William J.	individual)				
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Ware, William R.	individual)			<u> </u>	
Business or Residence Addre 2599 74th Street, Lubbock, T	•	eet, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

<ul> <li>Each general and m</li> </ul>	anaging partner of p	partner issuers.			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, it Glover, Leslie	findividual)				
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, it McGee, Edmund	individual)				
Business or Residence Addre 2599 74th Street, Lubbock, T		eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Roberts, Melisa	findividual)				
Business or Residence Addre 2599 74th Street, Lubbock, T	•	eet, City, State, Zip Code)			
Check box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	indiviđual)				
Business or Residence Addres	ss (Number and Stre	eet, City, State, Zip Code)			
Check box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				B. IN	NFORMA	ATION A	BOUT (	OFFERI	NG			
1. Has t	he issuer so	ld or does t	he issuer in					_	LII OF		Yes ⊠	No
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?												
2. What	is the mini	mum invest	ment that w	ill be accep	oted from a	ny individu	al?				<u>\$10</u>	00,000
3. Does	the offering	g permit joi	nt ownershi	p of a singl	e unit?						Yes ⊠	No □
comn a per states	the information of sistematics of the list of the natural of the n	milar remusted is an asme of the	neration for ssociated po broker or d	r solicitation erson or age ealer. If m	n of purcha ent of a bro ore than fi	sers in com ker or deal ve (5) pers	nection with er registere ons to be li	h sales of so	ecurities in SEC and/or	the offering with a stat	g. If te or	
Full Nam	ie (Last nam	ne first, if in	idividual)									
Duniman	Davida		(NI	NONE - N		" - C - 4-)						
Business	or Residen	e Address	(Number ar	ia Street, C	ity, State, Z	ip Code)						
Name of	Associated	Broker or I	Dealer									
	Which Pers All States"									🗀 All	l States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[co]	□ [CT]	□ [DE]	□ [DC]	[FL]	☐ [GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[ AM]	[IM]	[MN]	$\square$ [MS]	[MO]
MT]	[NE]	[ NV]	□ [NH]	[иј]	[MM]	☐[NY]	[NC]	[ND]	[но]	[OK]	[OR]	[PA]
[RI]	[\$C]	[SD]	□ [TN]	□ [TX]	UT]	[VT]	[VA]	[AW]	[WV]	[MI]	[WY]	[PR]
Full Nam	e (Last nam	e first, if in	dividual)									
Business	or Resident	e Address	(Number ar	nd Street, C	ity, State, Z	ip Code)						
Name of	Associated	Broker or [			,	<u> </u>						
	Which Pers All States" of									🗆 All	l States	
[AL]	[AK]	[AZ]	[AR]	CA]	[co]	[CT]	[DE]	□ [DC]	[FL]	GA]	[HI]	[ID]
[IL]	[NI]	[AI]	[KS]	☐ [KY]	[LA]	[ME]	[MD]	[MA]	[IM]	[MN]	[MS]	[MO]
[TM]	[NE]	[ии]	[NH]	[ци]	[ NM]	□ [ич]	[NC]	[ ND]	[HO]	[OK]	[OR]	□ [PA]
[RI]	<pre>[] (sc)</pre>	[SD]	TN]	[TX]	UT]	[TV]	[VA]	[AW]	$\square$ [WV]	$\square$ [WI]	[WY]	[PR]
Full Nam	e (Last nam	e first, if in	dividual)									
Business	or Residenc	e Address (	(Number an	d Street, C	ity, State, Z	ip Code)				<u> </u>		
Name of	Associated	Broker or D	Dealer									
	Which Personal States" of										States	
[AL]	□ [AK]	[AZ]	[AR]	[CA]	[CO]	□ (CT)	[DE]	[DC]	[FL]	GA]	[HI]	[ID]
[IL]	$\square$ [IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[IM]	[MN]	[MS]	[MO]
[MT]	NE]	[NV]	[NH]	[NJ]	[MM]	[Үи]	[NC]	☐[ND]	[но]	[○K]	□ [OR]	[PA]
[RI]	[sc]	[SD]	□ [TN]	[XT]	[UT]	[TV]	[VA]	[WA]	[wv]	[WI]	☐ [WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box \( \square\$ and indicate in the column below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security		Aggregate Tering Price	Amount Already Sold
	Debt			
	Equity	<b>S</b>	25,750,000	\$ 25,750,000
	⊠ Common ☐ Preferred			
	Convertible Securities (including warrants)	<b>S</b>		s
	Partnership Interests			\$
	Other (Specify)			s
	Total			s 25,750,000
	Answer also in Appendix, Column 3, if filing under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Number Investors	Aggregate Dollar Amount Of Purchases
	Accredited Investors	<u>85</u>		\$ <u>22,175,010</u>
	Non-accredited Investors	23		\$ <u>3,574,990</u>
	Total (for filings under Rule 504 only)			_ \$
	Answer also in Appendix, Column 4, filing under ULOE			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.  Type of Offering		Type of Security	Dollar Amount Sold
	Rule 505		Security	_ \$
	Regulation A			_ s
	Rule 504			
	Total		•	s
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		🗖	S
	Printing and Engraving Costs		🗆	\$
	Legal Fees		🛛	\$20,000
	Accounting Fees	•••••	🛛	\$3,000
	Engineering Fees		🗀	S
	Sales Commissions (Specify finder's fees separately)		🗆	\$
	Other Expenses (identify) Filing Fees and Miscellaneous Expenses	•••••	🛛	\$2,000
	Total		🛛	s <u>25,000</u>

_	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSE	S AND L	JSE	OF PROCE	EDS
	total expenses furnished in response to F	ate offering price given in response to Part C-Qu art C-Question 4.a. This difference is the "ad	ljusted gros	SS		<b>\$</b> 25,725,000
5.	Indicate below the amount of the adjusted grof the purposes shown. If the amount for ar to the left of the estimate. The total of the purposes to Part C-Que	D				
					Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees				\$ <b></b>	\$
	Purchase of real estate		.,		\$	\$
	Purchase, rental or leasing and installa	ation of machinery and equipment			\$	\$
	Construction or leasing of plant buildi	ngs and facilities			\$	\$
	Acquisition of other businesses (inclu					
	,	s or securities of another issuer pursuant to a merge		×	\$22,500,000 [	\$
				$\boxtimes$	\$ <u>672,203</u>	\$
	Working capital			X	\$ <u>2,222,797</u>	\$
	Other (specify) Support fees following	ng acquisition transaction	· · ·	Ø	\$ 330,000	\$
					s	\$
				×	\$ <u>25,725,000</u>	\$
	Total Payments Listed (column totals	added)			<b>⊠</b> \$	25,725,000
		D. FEDERAL SIGNATURE				
sig	nature constitutes an undertaking by the issu	ned by the undersigned duly authorized person. It ier to furnish to the U.S. Securities and Exchange accredited investor pursuant to paragraph (b) (2) of	Commissio			
İss	uer (Print or Type)	Signature	Date			-
	ne Star State Bancshares, Inc.	1 (	Decem	ber	17, 2007	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Αla	an Lackey	Chief Executive Officer and President				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)